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Bib Data Sheet

CONFIRMATION NO. 2216

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/688,416 | <b>FILING OR 371(c)<br/>DATE</b><br>10/17/2003<br><b>RULE</b> | <b>CLASS</b><br>435 | <b>GROUP ART UNIT</b><br>1637 | <b>ATTORNEY DOCKET<br/>NO.</b><br>960296.00129 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

David Charles Schwartz, Madison, WI;  
Eileen T. Dimalanta, Madison, WI;  
Juan J. de Pablo, Madison, WI;

\*\* CONTINUING DATA \*\*\*\*\* CIP 10/713898; CON 60/419884, 10/8/02

CIP 6,610,256 9/24/01; CIP 6294,136 5/13/97; CON 5720928 4/3/95

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
01/28/2004

|  |   |                           |                        |                       |                            |
|--|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no | 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance | STATE OR<br>COUNTRY<br>WI | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>94 | INDEPENDENT<br>CLAIMS<br>6 |
| Verified and<br>Acknowledged   | Examiner's Signature _____<br>Initials _____  |                           |                        |                       |                            |

## ADDRESS

27114

## TITLE

Micro-channel long molecule manipulation system

|  |   |  |
|--|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>1245 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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| Verified and<br>Acknowledged   | <i>Stephen K. Amt</i><br>Examiner's Signature | <i>SCM</i><br>Initials         |                               |                                    |  |

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